Division of Health Service Regulation

STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:		(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01		(X3) DATE SURVEY COMPLETED				
			B. WING		F			
		HAL011262	D. WING		12/3	31/2018		
NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE								
CHUNN'S COVE ASSISTED LIVING 67 MOUNTAIN BROOK ROAD ASHEVILLE, NC 28805								
(X4) ID PREFIX TAG	(EACH DEFICIENCY	TEMENT OF DEFICIENCIES MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOUL CROSS-REFERENCED TO THE APPROI DEFICIENCY)	D BE	(X5) COMPLETE DATE		
{C 000}	Initial Comments		{C 000}					
	by Dennis Harrell o	Follow Up Construction Survey n 12-31-2018. were not corrected. Further						
{C 189}	Building Equipment Maintained Safe, Operating		{C 189}					
	mechanical, and plu care home shall be operating condition (k) This Rule shall facilities with the ex	11 OTHER d all fire safety, electrical, umbing equipment in an adult maintained in a safe and						
	doors are prevented latching to resist the Corridor doors that latch present the poin one space can quand the remainder of Finding on 12-31-20 c. The door to room	vation, many other corridor d from closing quickly and e passage of fire and smoke. do not close completely and passibility that a fire that begins uickly spread to the corridor of the facility.						
{C 191}	Unvented & Portable	e Elec. Heaters Prohibited	{C 191}					
	SECTION .0300 - F 10A NCAC 13F .03 REQUIREMENTS (b) There shall be a							

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

(X6) DATE TITLE

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	NG: 01	COMPLETED						
7. BOILE	110.01	R						
HAL011262 B. WING		12/31/2018						
NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE								
CHUNN'S COVE ASSISTED LIVING 67 MOUNTAIN BROOK ROAD ASHEVILLE, NC 28805								
(X4) ID SUMMARY STATEMENT OF DEFICIENCIES ID PROVIDER'S PLAN OF CORRECTION (X5)								
PREFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX TAG REGULATORY OR LSC IDENTIFYING INFORMATION) TAG		D BE COMPLETE						
{C 191} Continued From page 1 {C 191}								
maintain 75 degrees F (24 degrees C) under winter design conditions. In addition, the following shall apply to heaters and cooking appliances. (2) Unvented fuel burning room heaters and portable electric heaters are prohibited. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities. This Rule is not met as evidenced by: Based on observation the facility failed to adhere to the prohibition of portable electric heaters. Portable electric heaters are a potential fire hazard and as such could affect all occupants of the facility. Finding on 12-31-2018: There was still a portable electric heater found in the Administrator's Office.								

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